

Amanda Taylor Board of Sumter County Commissioners Financial Services Department 7375 Powell Road Wildwood, FL 34785

Ref: RFP 172-0-2010/AT Emergency Ambulance Services

Dear Ms. Taylor,

Per your request, please find the following responses to the questions related to RFP 172-0-2010/AT Emergency Ambulance Services.

AMR's original response to RFP 172-0-2010/AT focused on the emergency ambulance requirements and therefore did not include aspects of the interfacility ambulance service. You will note that the quantities of resources for production such as ambulances, equipment and personnel, are **all increased**, but the user fees and subsidy requested **are unchanged**. These increases in resources are to reflect the increase in demand for service from combining emergency and non-emergency service. There is no increase in fees or cost to the community because it would not be appropriate for the County to subsidize non-emergency ambulance service.

Please note that each question was left in its original format in **bolditalic font** and that each response is indicated in regular font. Should any further clarification be needed, please feel free to contact me at your earliest convenience.

Regards,

Tomas Diaz, General Manager

The following are the issues that I need clarified by AMR and R/M:

1. I need for both to adjust their customer rates to match the current LSEMS rates that are as follows: (BLS, Non-Emergency \$300.00; BLS, Emergency \$350.00; ALS, Non-Emergency \$430.00; ALS, Emergency \$475.00; ALS2 \$575.00; Mileage \$8.25 / mile; Rural Mileage \$10.50 / mile). This will provide for AMR to include the non-emergency transport operation as well as provide for the appropriate comparison at the adjusted subsidy proposed. This is the first primary work for confirming the costs to each other and to our existing service.

As originally proposed in AMR's initial bid, (Section VIII, page 115), the Emergency rates match the rates currently charged by LSEMS. AMR also included an Emergency rate for BLS of \$350.00 that matches the current rates charged by LSEMS.

AMR initially did not include the Non–Emergency rates based on the RFP criteria for 911. The customer rates AMR intends to charge if AMR is named the successful bidder would match the current rates charged by LSEMS (i.e.,BLS, Non-Emergency \$300.00; ALS, Non-Emergency \$430.00; Mileage \$8.25 / mile; Rural Mileage \$10.50 / mile).

2. AMR to confirm that ALL dispatch will be located in Sumter County.

AMR confirms that a primary 24 hour dispatch center will be located in Sumter County with redundant back-up operations from Tampa.

3. AMR to confirm that the open positions for this contract will be considered for displaced LSEMS employees first, before existing AMR employees and general public.

AMR confirms that all open positions for field ambulance operations at time of implementation will be considered for displaced LSEMS employees first, existing AMR employees second and qualified persons not currently employed by either LSEMS or AMR if there is still a need for candidates. With the addition of positions for the non-emergency business, there are 61 to 65 Sumter county based full time positions. (For more detail, please also see AMR's response to an unnumbered question on a similar topic, page 5).

4. AMR to confirm existing and proposed 800MHz radio system upgrade are included in their final pricing.

AMR confirms that the existing and proposed 800MHz radio system upgrades are included in their final pricing.

5. AMR to confirm fire dispatch is not included; however, confirm they are open to providing that service.

AMR confirms that fire dispatch is <u>not</u> included in the economic aspects of proposed services. However, we are open to providing that service. AMR has experience in fire service (EMS and fire suppression) dispatch. We need to understand client department policies, procedures and service expectations before a proposal for fire dispatch service can be presented to interested parties

6. AMR to confirm CAAS accreditation will be achieved for the Sumter County operation no later than 6 months from the start of operations.

The CAAS Accreditation Review Committee meets on a quarterly basis. AMR confirms that we will have submitted a completed CAAS accreditation packet within 6 months of the award of the Sumter County contract. However, it must be understood that affirmation of accreditation is subject to the timing of the CAAS Accreditation Review Committee's quarterly meeting. AMR has over 40 CAAS Accredited operations, more than any other ambulance provider.

7. AMR to confirm the number of clinicians (AMR and other) overseen by Dr. Nelson.

The Office of the Medical Director for AMR Florida Operations provides clinical oversight for approximately 581 EMTs and Paramedics across the State of Florida. Dr. Nelson does not provide clinical medical direction for any EMS agency other than AMR.

American Medical Response – AMR

 Upon review it would appear that AMR proposes less transport units (ambulances) than provided by the incumbent or the alternate proposal – AMR could please provide more detail in call demand / hour / location (systems status management) on how their proposal would NOT be a reduction to the current level of service.

AMR's original proposal focused solely on its emergency ambulance service offering and therefore did not include unit hours required for service to non-emergency patients. Combining the resources for both emergency and non-emergency ambulance service is not a reduction, but instead is an <u>increase in resources</u> as compared to that reportedly currently deployed by LSEMS.

In the proposed arrangement the level of service is not defined by the quantity of unit hours, but instead by the response time performance of the contractor. AMR has agreed to a response time measured performance arrangement with Sumter County if awarded the contract. That means that AMR will adjust unit hours as required to meet the response time standards set in the RFP. With this commitment to response time, the quantity of unit hours in the initial system status plan is just that, an initial plan.

Based on our experience in meeting the highest level of customer service and response time compliance in similar communities across the U.S. and Florida, AMR, clarifies that we would deploy an additional 25 percent ambulance unit hours to service non-emergency call requests. Combining the emergency and interfacility transport business as described in the clarifying questions, AMR is committed to providing:

- Ten (10) identical, new ALS equipped ambulances housed in Sumter County, and dedicated to serving Sumter County. This is an increase of two (2) new identical ambulances as detailed in our initial emergency focused proposal.
- Four (4) additional ALS supplied and equipped reserve ambulances in Sumter County to handle any surge in demand for emergency or non-emergency ambulance service. The total quantity of ambulances for emergency and nonemergency as well as reserve is fourteen (14).

AMR, utilizes both proven industry-wide statistical and operational practices common in high performance EMS operations, as well as our proprietary computerized strategic deployment technology, to model and project both the demand for and capacity of ambulance resources. While the mechanism of this technology is proprietary and confidential, AMR's methods included obtaining historical ambulance run and dispatch logs and used this information to estimate demand and related supply requirements. This projection includes variance in demand based on the historical data plus a margin of safety.

The proposed <u>initial</u> geographic deployment plan (station locations) and schedule is described in detail in our proposal. The location of ambulances and quantity of unit hours will be adjusted as needed to meet response time performance expectations.

 AMR indicates that they could accept and hire all current ambulance service employees assigned to Sumter County at their current rate of pay. AMR proposes a local manager for Sumter County that is a current employee of AMR. How would AMR employ the incumbents assigned to Sumter County including supervisory positions at their current rate of pay while staffing a lesser number of units than currently provided?

AMR's staffing plan, if selected by Sumter County, expects to hire approximately 61 to 65 employees from the local, Sumter County area.

AMR is committed to offer employment to all current ambulance service employees based on the rate of pay documented as of the date of submission of the original proposal (i.e., 12/03/2010). Furthermore, we recognize that these hard-working people are doing a good job today, and therefore will minimize the pre-employment screening process. Applicants from LSEMS will need only to provide documentation of medical and vehicle operating credentials and pass a post-offer pre-employment drug screen. After the initial transition period, and subsequent applicants will be subject to the standard pre-employment screening process.

Supervisors for the Sumter County operation will be selected from a pool of the best qualified applicants, including applicants from LSEMS as well as current AMR employees. LSEMS supervisors not selected for leadership positions will be offered field positions for which they are qualified at a rate of pay commensurate with the wages they would receive based on ambulance crew roles.

AMR's initial emergency focused staffing plan is outlined in Section I, page 8 and explains that AMR's 911 full time staffing plan will include:

- o 32 full time employees (FTE) for field ambulance operations and
- o (3) FTE's Supervisors.

To meet the nonemergency staffing needs, AMR proposes our intent to hire an additional 12 to 15 full-time employees (FTEs) to staff these inter-facility ambulances.

Non-field assigned, <u>local</u> full time positions include:

- One (1) Manager (current AMR employee),
- One (1) CES/QA position,
- Eight (8) FTE Dispatchers,
- o One (1) Admin/Patient Billing liaison,
- Three (3) Vehicle Service Technicians (Materials Management)
- One (1) Fleet Maintenance Mechanic

 AMR could please provide a full disclosure of Medical Direction: Dr. Nelson is listed as primary Medical Director with Dr. Halpern as his cover (back-up). Is there another layer of physician coverage if neither is available? What other agencies do Dr. Nelson, Dr. Halpern and any other covering physician(s) provide Medical Direction services for in the State of Florida?

Following is a clarification of the medical leadership and quality assurance for AMR in Sumter County:

The AMR Office of the Medical Director (AMR OMD). AMR OMD provides clinical oversight for all Florida AMR Operations. The office is headed Dr. Joe Nelson, who resides in Pinellas County, FL. Additional medical oversight is provided by two Associate Medical Directors, Dr. John Halpern (Coral Springs, FL) and a recent addition, Dr. David Erlandson (Key West, FL). Dr. Nelson does not provide clinical medical direction for any EMS Rescue or transport agency other than AMR. He does provide part-time consultative services of a non clinical (not dealing with direct patient care) nature to several EMS training programs/schools and to the State of Florida (through a State contract held by the Florida Association of EMS Medical Directors). Dr. Halpern provides medical direction for a small security agency that employs Paramedics in a gated community in Palm Beach County. Dr. Erlandson does not provide clinical medical direction for any EMS Rescue or transport agency other than AMR. All three physicians are Board Certified in Emergency Medicine and continue to practice as emergency physicians in their communities.

Clinical/Educational Services Department. The AMR OMD is supported by three Clinical/Educational Services Department Coordinators (Service areas of Miami-Dade/Monroe, Broward/Palm Beach and Hillsborough/Pasco/Hardee) as well as a group of senior EMS Paramedics who take administrative call (Medical Officer of the Day or MOD). Also, AMR Field Training Officers (FTOs) work jointly under the OMD and CES Department. It is anticipated that the Sumter County Operation will have local CES representation as well as Field Training Officers.

On-line Medical Direction. The Medical Director or an Associate Medical Director is on duty and available for consultation on a 24 hour/seven-day-per-week basis. This coverage is indicated on the monthly MOD schedule. While a non physician MOD may be on call for routine or administrative issues (such as questions on Do Not Resuscitate orders), there is always a Physician Medical Director or Associate Medical Director available for medical and/or high level administrative consultation.

Paramedic Orders. Paramedics function under "Standing Orders" which do not require contact with either the receiving hospital emergency department physician or the AMR Medical Director/Associate Medical Director. For real-time emergency treatment outside of "Standing Orders", the AMR Paramedic's contact the receiving hospital emergency department physician for orders. The AMR Medical Director/Associate Medical Directors are available continuously and offer a layer of redundancy to hospital professional staff. Typically, the AMR Medical Director/Associate Medical Director is consulted in less urgent situations such as refusals of transport, Critical Care Transport preparation before a patient is moved from the hospital ICU and questions about medications that a patient may have been prescribed.

Questions by Selection Committee / Responses by AMR

Off-line Medical Direction. For offline medical direction issues such as QA meetings, educational programs and protocol revision, the Medical Director is the primary contact with an Associate Medical Director covering on an occasional basis.

AMR

1. Can the company provide a list of U/HU numbers for other counties in which they provide emergency services to compare to the number they have generated for Sumter.

For the purposes of answering this question, AMR is providing a "snapshot" of various comparable areas in which we operate throughout the South Division. Excluded from this snapshot are areas in which AMR operates in the Interfacility Transport market (IFT) and/or *is not* the primary provider of 9-1-1 services.

	Actual UHU	Budgeted UHU	Deviation	Actual Unit Hours	Budgeted Unit Hours	
Collin County	0.069	0.083	(0.014)	2,611	2,604	
Milam County	0.084	0.101	(0.017)	2,230	2,232	
Duncan	0.171	0.168	0.002	1,736	1,925	
Hoke County	0.145	0.169	(0.024)	2,997	2,852	
Alamogordo	0.233	0.168	0.065	2,387	2,648	
Natchez MS	0.139	0.138	0.000	4,753	4,841	
Hunt County	0.202	0.211	(0.009)	3,551	3,578	
Troup County	0.241	0.239	0.002	2,993	2,976	
Wichita Falls	0.369	0.365	0.004	1,980	2,135	
Dona Ana County	0.213	0.234	(0.022)	6,061	5,996	
Lake Havasu	0.120	0.121	(0.001)	10,772	10,416	
Amarillo*	0.297	-	0.297	5,358		
Monroe - NLA	0.398	0.365	0.033	5,008	5,238	
Arlington	0.286	0.275	0.011	7,679	7,842	
Gulfport - SMS	0.338	0.317	0.021	16,900	18,144	
Jackson - CMS	0.306	0.267	0.038	16,900	18,144	
Average UHU	0.226	0.215				

^{*}AMR began operations of the Amarillo business unit in January, 2010. Historical data was not available for AMR to derive a budgetary UHU and budgeted unit hours for the reporting period of FY2010. Amarillo is being utilized in the spreadsheet for the purposes of comparison to Sumter County expectations regarding UHU and unit hours.

2. Are the "Medical Officer of the Day trained to the physician level?

Our Medical Officer of the Day "MOD" schedule is comprised of one (1) physician and one (1) non-physician at all times to provide coverage. The non-physicians are all experienced clinicians with a minimum of more than 15 years of clinical field expertise in a 9-1-1 system and have passed the Medical Operations Manual test with a \geq 95% success rate of understanding. The MOD will typically handle issues of a routine or administrative nature while the physician is on call for complex clinical and high level administrative issues. The MOD ALWAYS has the ability to bring the physician on call into the situation without delay. We have used the MOD call schedule for almost twenty years with excellent results.

Sample schedule below:

AMR Florida MOD Schedule

January 2011

Sun	Mora	Tæ	Wed	Thu	Fri	Sat		
Note Add New MOD Steve Cerovich (AMR Hillsborough) cell 813 781-1307 Direct Connect 158*17270*52								
3 B. Liddle Back-up MD: Dr. Nelson	3 Dr. Nelson Back-up MOD AJ Mangle	4 M. House Back-up MD: Dr. Nelson	T. Diaz Back-up MD: Dr Halpern	6 S Cerovich Back-up MD: Dr. Nelson	7 AJ Mangle Back-up MD: Dr. Nelson	8 Dr. Nelson Back-up MOD M. House		
M. House Back-up MD: Dr. Nelson	S Cerovich Back-up MD: Dr. Nelson	11 Dr Halpem Back-up MOD: T. Diaz	12 B. Liddle Back-up MD: Dr. Nelson	T. Diaz T. Diaz Back-up MD: Dr. Nelson	Dr. Nelson Back-up MOD M. House	AJ Mangle Back-up MD: Dr Halpem		
M. Keating Back-up MD Dr Halpern	17 T. Diaz Back-up MD: Dr. Nelson	18 S Cerovich Back-up MD: Dr Halpem	B. Liddle Back-up MD: Dr. Nelson	20 Dr Halpern Back-up MOD: T. Diaz	21 AJ Mangle Back-up MD: Dr Halpem	22 M. Keating Back-up MD Dr. Nelson		
T. Diaz T. Diaz Back-up MD: Dr Halpern	24 S Cerovich Beck-up MD: Dr. Nelson	25 Dr. Nelson Back-up MOD M. House	26 S Cerovich Back-up MD: Dr. Nelson	27 Dr Halpem Back-up MOD: B. Liddle	28 M. Keating Back-up MD Dr. Nelson	29 AJ Mangle Back-up MD: Dr Halpem		
30 Dr Halpern Back-up MOD: T. Diaz	31 M. House Back-up MD: Dr Halpern							

3. How does a crew member reach either Dr. Nelson or Dr. Halpren?

Crew members may directly contact either Dr. Nelson or Dr. Halpern via the dispatch center utilizing cell phone or landline. In this manner, all calls may be recorded for Quality Assurance and Quality Improvement purposes. Offline concerns can be directed to the Medical Director via e-mail or during face-to-face meetings. The AMR communication center can link ambulance or portable radios to a Nextel/cell phone for instantaneous telecommunications across multiple media.

4. How often does the medical director interact with the crew members?

Ambulance crews have different needs for direct contact with the medical director. Newer paramedics and EMTs may require more educational support and therefore attend more classroom time with the medical leadership team. "Seasoned" medics may require more accountability and coaching and therefore a more individualized discussion as compared to a classroom setting. The medical leadership team monitor each crew member performance and discuss mentoring strategies

All personnel have the capability of contacting Dr. Nelson by telephone, email, etc. on a continuous (24/7) basis. Dr. Nelson medical direction is based upon the quality of medical contact in real-time and not quantity. Dr. Nelson actively participates in QA, educational, and other activities and is committed to the notion that the Medical Director and Associate Medical Directors currently do ride along time, and will do ride along time in the Sumter County operation, as well as provide face to face education via lectures, advanced airway, CCT journal club, etc.) and QA meeting contacts. For example, Dr. Nelson currently and actively engages himself on scene at the "12 Hours of Sebring Race Event" every year to interact with the crews and provide real time medical oversight. Dr. Nelson also has sponsored three very lengthy Critical Care Transport classes in the past 2 years in which he has lectured extensively. Most recently, AMR and Dr. Nelson have employed internet based video technology to utilize this educational opportunity to hold simultaneous lectures in Tampa and Miami currently. These are some of the interactions that AMR can do better than most.